

October 19, 2006

Montana Medicaid Notice

Commercial and Specialized Non-Emergency Transportation Providers

Mileage Rate Increase

Effective 11/01/2006

Effective November 1, 2006, the Department will increase the mileage rate for commercial and specialized non-emergency transportation providers in accordance with the following fee schedule. All other edits and policies remain unchanged. These rates will be reflected in an upcoming rule change.

Procedure Code	Description	Use	Reimbursement	PA
Commercial Transportation - Taxicab				
A0100	Non-Emergency Transportation	Taxi over 16 miles	\$0.76 per mile	Y
A0140	Non-Emergency Transportation	Taxi under 16 miles	\$12.16 one-way flat fee	Y
Specialized Non-Emergency Transportation - Wheelchair Van				
A0100	Non-Emergency Transportation	Wheelchair van over 16 miles	\$0.76 per mile	Y
A0130	Non-Emergency Transportation	Wheelchair van under 16 miles	\$12.16 one-way flat fee	Y

Contact Information

For questions regarding transportation reimbursement or procedures, please contact Dan Peterson, Chief, Acute Services Bureau at (406) 444-4144.

For claims questions or additional information, contact Provider Relations:

Provider Relations toll-free in- and out-of-state: 1-800-624-3958

Helena: (406) 442-1837

Visit the Provider Information website:

<http://www.mtmedicaid.org>